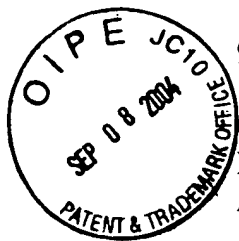


09-10-04

3625
71

URGENT

9/8/04



Commissioner for Patents
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Reference: Revocation of Power of Attorney and Change of Address Form
Application Number: 09/677,954 Filed: 10/02/2000
Group Art Unit: 3625 Examiner: Smith, J.A.
Currently there is a RCE under review filed in April 2004

Dear Sir,

Enclosed are the three forms revoking the power of attorney to Stephen L. Baldwin and appointing Raman K. Rao as the representative for all the inventors. Please note the change of address.

Please let me know if any fees are due.

Raman K Rao

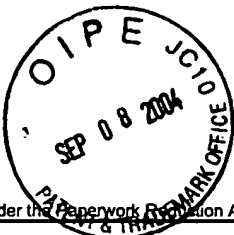
Raman K. Rao
Applicant and Applicants Representative

Raman K. Rao
3099 Alexis Drive, CA 94304
Tel: 650 941 7096
Fax: 650 618 1553

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/677,954
Filing Date	10/02/2000
First Named Inventor	RAO
Art Unit	3625
Examiner Name	Smith, J.A.
Attorney Docket Number	7

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

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GROUP 3600

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	RAMAN K. RAO				
Address	3099 ALEXIS DRIVE				
Address					
City	PALO ALTO	State	CA	Zip	94304-1304
Country	USA				
Telephone	650 941 7096	Fax	650 618 1553		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

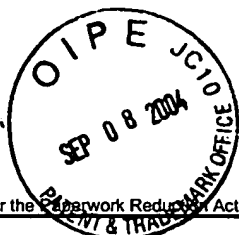
Name	RAMAN K. RAO		
Signature			
Date	9/8/04	Telephone	650 941 7096

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	09/677,954
Filing Date	10/02/2000
First Named Inventor	RAO
Art Unit	3625
Examiner Name	Smith, J.A.
Attorney Docket Number	7

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Customer Number:**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	RAMAN K. RAO				
Address	3099 ALEXIS DRIVE				
Address					
City	PALO ALTO	State	CA	Zip	94304-1304
Country	USA				
Telephone	650 941 7096	Fax	650 618 1553		

I am the:

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

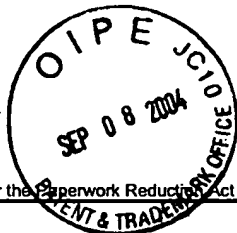
Name	SUNIL K. RAO		
Signature	<i>Sunil K. Rao</i>		
Date	9/8/04	Telephone	650 941 7096

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<input checked="" type="checkbox"/> Firm or Individual Name	RAMAN K. RAO				
Address	3099 ALEXIS DRIVE				
Address					
City	PALO ALTO	State	CA	Zip	94304-1304
Country	USA				
Telephone	650 941 7096	Fax	650 618 1553		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	SANJAY K. RAO		
Signature			
Date	9/8/04	Telephone	650 941 7096

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